

**CLAIMS ONLY**

**Application Number**

10-712

File-Date -

Digitized by srujanika@gmail.com

File Date: 7/25/08

**Applicant(s)**

\* May be used for additional claims or amendments

| CLAIMS       | AS FILED |         | AFTER FIRST AMENDMENT |         | AFTER SECOND AMENDMENT |         | * May be used for additional claims or amendments |         |        |         |
|--------------|----------|---------|-----------------------|---------|------------------------|---------|---|---------|--------|---------|
|              | Indep.   | Depend. | Indep.                | Depend. | Indep.                 | Depend. | Indep.  | Depend. | Indep. | Depend. |
| 1            |          |         |                       |         |                        |         | 51  |         |        |         |
| 2            |          | /       |                       |         |                        |         | 52  |         |        |         |
| 3            |          | /       |                       |         |                        |         | 53  |         |        |         |
| 4            |          | /       |                       |         |                        |         | 54  |         |        |         |
| 5            |          |         |                       |         |                        |         | 55  |         |        |         |
| 6            | /        |         |                       |         |                        |         | 56  |         |        |         |
| 7            | /        |         |                       |         |                        |         | 57  |         |        |         |
| 8            |          |         |                       |         |                        |         | 58  |         |        |         |
| 9            | /        |         |                       |         |                        |         | 59  |         |        |         |
| 10           | /        |         |                       |         |                        |         | 60  |         |        |         |
| 11           | /        |         |                       |         |                        |         | 61  |         |        |         |
| 12           | /        |         |                       |         |                        |         | 62  |         |        |         |
| 13           |          |         |                       |         |                        |         | 63  |         |        |         |
| 14           |          | /       |                       |         |                        |         | 64  |         |        |         |
| 15           |          | /       |                       |         |                        |         | 65  |         |        |         |
| 16           |          |         |                       |         |                        |         | 66  |         |        |         |
| 17           |          |         |                       |         |                        |         | 67  |         |        |         |
| 18           |          |         |                       |         |                        |         | 68  |         |        |         |
| 19           |          |         |                       |         |                        |         | 69  |         |        |         |
| 20           |          |         |                       |         |                        |         | 70  |         |        |         |
| 21           |          |         |                       |         |                        |         | 71  |         |        |         |
| 22           |          |         |                       |         |                        |         | 72  |         |        |         |
| 23           |          |         |                       |         |                        |         | 73  |         |        |         |
| 24           |          |         |                       |         |                        |         | 74  |         |        |         |
| 25           |          |         |                       |         |                        |         | 75  |         |        |         |
| 26           |          |         |                       |         |                        |         | 76  |         |        |         |
| 27           |          |         |                       |         |                        |         | 77  |         |        |         |
| 28           |          |         |                       |         |                        |         | 78  |         |        |         |
| 29           |          |         |                       |         |                        |         | 79  |         |        |         |
| 30           |          |         |                       |         |                        |         | 80  |         |        |         |
| 31           |          |         |                       |         |                        |         | 81  |         |        |         |
| 32           |          |         |                       |         |                        |         | 82  |         |        |         |
| 33           |          |         |                       |         |                        |         | 83  |         |        |         |
| 34           |          |         |                       |         |                        |         | 84  |         |        |         |
| 35           |          |         |                       |         |                        |         | 85  |         |        |         |
| 36           |          |         |                       |         |                        |         | 86  |         |        |         |
| 37           |          |         |                       |         |                        |         | 87  |         |        |         |
| 38           |          |         |                       |         |                        |         | 88  |         |        |         |
| 39           |          |         |                       |         |                        |         | 89  |         |        |         |
| 40           |          |         |                       |         |                        |         | 90  |         |        |         |
| 41           |          |         |                       |         |                        |         | 91  |         |        |         |
| 42           |          |         |                       |         |                        |         | 92  |         |        |         |
| 43           |          |         |                       |         |                        |         | 93  |         |        |         |
| 44           |          |         |                       |         |                        |         | 94  |         |        |         |
| 45           |          |         |                       |         |                        |         | 95  |         |        |         |
| 46           |          |         |                       |         |                        |         | 96  |         |        |         |
| 47           |          |         |                       |         |                        |         | 97  |         |        |         |
| 48           |          |         |                       |         |                        |         | 98  |         |        |         |
| 49           |          |         |                       |         |                        |         | 99  |         |        |         |
| 50           |          |         |                       |         |                        |         | 100   |         |        |         |
| Total Indep  | 5        |         |                       |         |                        |         | Total Indep                                       |         |        |         |
| Total Depend | 5        |         |                       |         |                        |         | Total Depend                                      |         |        |         |
| Total Claims | //       |         |                       |         |                        |         | Total Claims                                      |         |        |         |